

<b>United States Bankruptcy Court</b> <b>EASTERN DISTRICT OF WASHINGTON</b>				<b>Voluntary Petition</b>	
Name of Debtor (if individual, enter Last, First, Middle): <b>HILDERBRAND, KELSEY</b>			Name of Joint Debtor (Spouse)(Last, First, Middle): <b>HILDERBRAND, JENNIFER B.</b>		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>NONE</b>			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>NONE</b>		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>7517</b>			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>9092</b>		
Street Address of Debtor (No. & Street, City, and State): <b>2635 INDY LANE</b> <b>Wenatchee, WA</b>			Street Address of Joint Debtor (No. & Street, City, and State): <b>2635 INDY LANE</b> <b>Wenatchee, WA</b>		
<div style="display: flex; justify-content: space-between;"> <span>ZIP CODE</span> <span><b>98801</b></span> </div>			<div style="display: flex; justify-content: space-between;"> <span>ZIP CODE</span> <span><b>98801</b></span> </div>		
County of Residence or of the Principal Place of Business: <b>Chelan</b>			County of Residence or of the Principal Place of Business: <b>Chelan</b>		
Mailing Address of Debtor (if different from street address): <b>SAME</b>			Mailing Address of Joint Debtor (if different from street address): <b>SAME</b>		
<div style="display: flex; justify-content: space-between;"> <span>ZIP CODE</span> <span></span> </div>			<div style="display: flex; justify-content: space-between;"> <span>ZIP CODE</span> <span></span> </div>		
Location of Principal Assets of Business Debtor (if different from street address above): <b>NOT APPLICABLE</b>					
<b>Type of Debtor</b> (Form of organization) (Check <b>one</b> box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and state type of entity below		<b>Nature of Business</b> (Check <b>one</b> box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Chapter 7  <input type="checkbox"/> Chapter 9  <input type="checkbox"/> Chapter 11  <input type="checkbox"/> Chapter 12  <input type="checkbox"/> Chapter 13               </div> <div> <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding   <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding               </div> </div>	
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests: _____ Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____		<b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter 11 Debtors:</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter).	
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).			
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					THIS SPACE IS FOR COURT USE ONLY
<b>Estimated Number of Creditors</b> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> 1-49</span> <span><input type="checkbox"/> 50-99</span> <span><input checked="" type="checkbox"/> 100-199</span> <span><input type="checkbox"/> 200-999</span> <span><input type="checkbox"/> 1,000-5,000</span> <span><input type="checkbox"/> 5,001-10,000</span> <span><input type="checkbox"/> 10,001-25,000</span> <span><input type="checkbox"/> 25,001-50,000</span> <span><input type="checkbox"/> 50,001-100,000</span> <span><input type="checkbox"/> Over 100,000</span> </div>					
<b>Estimated Assets</b> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> \$0 to \$50,000</span> <span><input type="checkbox"/> \$50,001 to \$100,000</span> <span><input type="checkbox"/> \$100,001 to \$500,000</span> <span><input checked="" type="checkbox"/> \$500,001 to \$1 million</span> <span><input type="checkbox"/> \$1,000,001 to \$10 million</span> <span><input type="checkbox"/> \$10,000,001 to \$50 million</span> <span><input type="checkbox"/> \$50,000,001 to \$100 million</span> <span><input type="checkbox"/> \$100,000,001 to \$500 million</span> <span><input type="checkbox"/> \$500,000,001 to \$1 billion</span> <span><input type="checkbox"/> More than \$1 billion</span> </div>					
<b>Estimated Liabilities</b> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> \$0 to \$50,000</span> <span><input type="checkbox"/> \$50,001 to \$100,000</span> <span><input type="checkbox"/> \$100,001 to \$500,000</span> <span><input type="checkbox"/> \$500,001 to \$1 million</span> <span><input checked="" type="checkbox"/> \$1,000,001 to \$10 million</span> <span><input type="checkbox"/> \$10,000,001 to \$50 million</span> <span><input type="checkbox"/> \$50,000,001 to \$100 million</span> <span><input type="checkbox"/> \$100,000,001 to \$500 million</span> <span><input type="checkbox"/> \$500,000,001 to \$1 billion</span> <span><input type="checkbox"/> More than \$1 billion</span> </div>					

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>KELSEY R HILDERBRAND and</b> <b>JENNIFER B. HILDERBRAND</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed:	Case Number:	Date Filed:	
<b>NONE</b>			
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor:	Case Number:	Date Filed:	
<b>NONE</b>			
District:	Relationship:	Judge:	
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition	<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). <b>X</b> <u>/s/ JOHN W. BEUHLER JR.</u> <span style="float: right;"><b>9/15/2014</b></span> <div style="display: flex; justify-content: space-between;"> <span>Signature of Attorney for Debtor(s)</span> <span>Date</span> </div>		
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**KELSEY R HILDERBRAND and****JENNIFER B. HILDERBRAND****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b)

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ KELSEY R HILDERBRAND**

Signature of Debtor

**X /s/ JENNIFER B. HILDERBRAND**

Signature of Joint Debtor

Telephone Number (if not represented by attorney)

**9/15/2014**

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

(Signature of Foreign Representative)

(Printed name of Foreign Representative)

(Date)

**Signature of Attorney\*****X /s/ JOHN W. BEUHLER JR.**

Signature of Attorney for Debtor(s)

**JOHN W. BEUHLER JR. WSBA# 14650**

Printed Name of Attorney for Debtor(s)

**JOHN BEUHLER LAW FIRM, PLLC**

Firm Name

**S. 23 WENATCHEE AVE., #124**

Address

**POB 3880****WENATCHEE, WA 98801****509 663-0531**

Telephone Number

**9/15/2014**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF WASHINGTON**

In re **KELSEY R HILDERBRAND**

**and**

**JENNIFER B. HILDERBRAND**

Case No.

(if known)

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Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**WARNING:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now.  
*[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

- ☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement]*  
*[Must be accompanied by a motion for determination by the court.]*
- ☐ Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.
- ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ KELSEY R HILDERBRAND

Date: 9/15/2014

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF WASHINGTON**

In re **KELSEY R HILDERBRAND**  
**and**  
**JENNIFER B. HILDERBRAND**

Case No.  
Chapter 7

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Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

**WARNING:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now.  
*[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit briefing.**

- ☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement]*  
*[Must be accompanied by a motion for determination by the court.]*
- ☐ Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.
- ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ JENNIFER B. HILDERBRAND

Date: 9/15/2014

# UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### **Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny



your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

In re KELSEY R HILDERBRAND and JENNIFER B HILDERBRAND

Debtor(s)

Case Number: \_\_\_\_\_

(If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this

☐ The presumption arises.☒ The presumption does not arise.☐ The presumption is temporarily inapplicable.

(Check the box as directed in Parts I, III, and VI of this statement.)

**CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME  
AND MEANS-TEST CALCULATION**

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

**Part I. MILITARY AND NON-CONSUMER DEBTORS**

1A

**Disabled Veterans.** If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Declaration of Disabled Veteran.** By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).

1B

**Non-consumer Debtors.** If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Declaration of non-consumer debts.** By checking this box, I declare that my debts are not primarily consumer debts.

1C

**Reservists and National Guard Members; active duty or homeland defense activity.** Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII.

**During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.**

☐ **Declaration of Reservists and National Guard Members** By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard

a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and

☐ I remain on active duty /or/

☐ I was released from active duty on \_\_\_\_\_, which is less than 540 days before this bankruptcy case was filed;

OR

b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/

☐ I performed homeland defense activity for a period of at least 90 days, terminating on \_\_\_\_\_, which is less than 540 days before this bankruptcy case was filed.

**Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION**

2	<b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed. a. <input type="checkbox"/> Unmarried. <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b> b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b> c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b> d. <input checked="" type="checkbox"/> Married, filing jointly. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b>			<b>Column A</b>  <b>Debtor's</b> <b>Income</b>	<b>Column B</b>  <b>Spouse's</b> <b>Income</b>									
All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six month total by six, and enter the result on the appropriate line.														
3	<b>Gross wages, salary, tips, bonuses, overtime, commissions.</b>			\$0.00	\$3,200.00									
4	<b>Income from the operation of a business, profession, or farm</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as a deduction in Part V.</b> <table border="1" data-bbox="196 768 1266 877"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td>Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$0.00	b.	Ordinary and necessary business expenses	\$0.00	c.	Business income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross receipts	\$0.00												
b.	Ordinary and necessary business expenses	\$0.00												
c.	Business income	Subtract Line b from Line a												
5	<b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</b> <table border="1" data-bbox="196 989 1266 1098"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td>Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$0.00	b.	Ordinary and necessary operating expenses	\$0.00	c.	Rent and other real property income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross receipts	\$0.00												
b.	Ordinary and necessary operating expenses	\$0.00												
c.	Rent and other real property income	Subtract Line b from Line a												
6	<b>Interest, dividends, and royalties.</b>			\$0.00	\$0.00									
7	<b>Pension and retirement income.</b>			\$0.00	\$0.00									
8	<b>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.			\$0.00	\$0.00									
9	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: <table border="1" data-bbox="196 1507 1266 1583"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td>Debtor \$0.00</td> <td>Spouse \$0.00</td> </tr> </table>			Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$0.00	Spouse \$0.00	\$0.00	\$0.00						
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$0.00	Spouse \$0.00												
10	<b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. <b>Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance.</b> Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. <table border="1" data-bbox="196 1766 1218 1808"> <tr> <td>a.</td> <td>HUSBAND'S MOTHER</td> <td>\$1,736.00</td> </tr> </table> Total and enter on Line 10			a.	HUSBAND'S MOTHER	\$1,736.00	\$1,736.00	\$0.00						
a.	HUSBAND'S MOTHER	\$1,736.00												
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).			\$1,736.00	\$3,200.00									
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.			\$4,936.00										

**Part III. APPLICATION OF § 707(b)(7) EXCLUSION**

13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	\$59,232.00
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>WASHINGTON</u> b. Enter debtor's household size: <u>5</u>	\$94,315.00
15	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. <input type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement.	

**Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).**

**Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)**

16	<b>Enter the amount from Line 12.</b>	\$									
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. <table border="1" style="width: 100%;"> <tr> <td>a.</td> <td></td> <td>\$</td> </tr> <tr> <td>b.</td> <td></td> <td>\$</td> </tr> <tr> <td>c.</td> <td></td> <td>\$</td> </tr> </table> Total and enter on Line 17	a.		\$	b.		\$	c.		\$	\$
a.		\$									
b.		\$									
c.		\$									
18	<b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.	\$									

**Part V. CALCULATION OF DEDUCTIONS FROM INCOME****Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

19A	<b>National Standards: food, clothing, and other items.</b> Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.		\$																
19B	<b>National Standards: health care.</b> Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. <table border="1" style="width: 100%;"> <thead> <tr> <th colspan="2">Household members under 65 years of age</th> <th colspan="2">Household members 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td>a1.</td> <td>Allowance per member</td> <td>a2.</td> <td>Allowance per member</td> </tr> <tr> <td>b1.</td> <td>Number of members</td> <td>b2.</td> <td>Number of members</td> </tr> <tr> <td>c1.</td> <td>Subtotal</td> <td>c2.</td> <td>Subtotal</td> </tr> </tbody> </table>		Household members under 65 years of age		Household members 65 years of age or older		a1.	Allowance per member	a2.	Allowance per member	b1.	Number of members	b2.	Number of members	c1.	Subtotal	c2.	Subtotal	\$
Household members under 65 years of age		Household members 65 years of age or older																	
a1.	Allowance per member	a2.	Allowance per member																
b1.	Number of members	b2.	Number of members																
c1.	Subtotal	c2.	Subtotal																

20A	<b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.	\$									
20B	<b>Local Standards: housing and utilities; mortgage/rent expenses.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 70%;">IRS Housing and Utilities Standards; mortgage/rental expense</td><td style="width: 25%; text-align: center;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td><td style="text-align: center;">\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net mortgage/rental expense</td><td style="text-align: center;">Subtract Line b from Line a.</td></tr> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$									
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$									
c.	Net mortgage/rental expense	Subtract Line b from Line a.									
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: <div style="border: 1px solid black; height: 50px; margin-top: 5px;"></div>	\$									
22A	<b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input checked="" type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	\$									
22B	<b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	\$									
23	<b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 70%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 25%; text-align: center;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td><td style="text-align: center;">\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td style="text-align: center;">Subtract Line b from Line a.</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$
a.	IRS Transportation Standards, Ownership Costs	\$									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.									

24	<p><b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b>            Complete this Line only if you checked the "2 or more" Box in Line 23.            Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">IRS Transportation Standards, Ownership Costs</td> <td style="width: 30%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$
a.	IRS Transportation Standards, Ownership Costs	\$									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.									
25	<p><b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social-security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b></p>										
26	<p><b>Other Necessary Expenses: mandatory payroll deductions for employment.</b> Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b></p>	\$									
27	<p><b>Other Necessary Expenses: life insurance.</b> Enter total average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b></p>	\$									
28	<p><b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due support obligations included in Line 44.</b></p>	\$									
29	<p><b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.</p>	\$									
30	<p><b>Other Necessary Expenses: childcare.</b> Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. <b>Do not include other educational payments.</b></p>	\$									
31	<p><b>Other Necessary Expenses: health care.</b> Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. <b>Do not include payments for health insurance or health savings accounts listed in Line 34.</b></p>	\$									
32	<p><b>Other Necessary Expenses: telecommunication services.</b> Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service -- such as pagers, call waiting, caller id, special long distance, or internet service -- to the extent necessary for your health and welfare or that of your dependents. <b>Do not include any amount previously deducted.</b></p>	\$									
33	<p><b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32</p>	\$									

**Subpart B: Additional Living Expense Deductions**
**Note: Do not include any expenses that you have listed in Lines 19-32**

34	<p><b>Health Insurance, Disability Insurance and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">Health Insurance</td> <td style="width: 30%; text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Disability Insurance</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Health Savings Account</td> <td style="text-align: right;">\$</td> </tr> </table> <p>Total and enter on Line 34</p> <p><b>If you do not actually expend this total amount,</b> state your actual total average monthly expenditures in the space below:</p> <p>\$ _____</p>	a.	Health Insurance	\$	b.	Disability Insurance	\$	c.	Health Savings Account	\$	\$
a.	Health Insurance	\$									
b.	Disability Insurance	\$									
c.	Health Savings Account	\$									



35	<b>Continued contributions to the care of household or family members.</b> Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$
37	<b>Home energy costs.</b> Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. <b>You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that reasonable and necessary and not already accounted for in the IRS Standards.</b>	\$
38	<b>Education expenses for dependent children less than 18.</b> Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b>	\$
39	<b>Additional food and clothing expense.</b> Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must demonstrate that the additional amount claimed is reasonable and necessary.</b>	\$
40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	\$
41	<b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40	\$

### Subpart C: Deductions for Debt Payment

42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.				\$
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
a.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	
b.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	
c.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	
d.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	
e.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	
	Total: Add Lines a - e				
43	<b>Other payments on secured claims.</b> If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.				\$
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount		
a.			\$		
b.			\$		
c.			\$		
d.			\$		
e.			\$		
	Total: Add Lines a - e				

44	<b>Payments on prepetition priority claims.</b> Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy. <b>Do not include current obligations, such as those set out in Line 28.</b>	\$															
45	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.	\$															
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;">Projected average monthly Chapter 13 plan payment.</td> <td style="width: 40%; text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</td> <td style="text-align: center;">x</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td style="text-align: center;">Total: Multiply Lines a and b</td> </tr> </table>	a.	Projected average monthly Chapter 13 plan payment.	\$	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$						
a.	Projected average monthly Chapter 13 plan payment.	\$															
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x															
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b															
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.	\$															
<b>Subpart D: Total Deductions from Income</b>																	
47	<b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.	\$															
<b>Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION</b>																	
48	<b>Enter the amount from Line 18 (Current monthly income for § 707(b)(2))</b>	\$															
49	<b>Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))</b>	\$															
50	<b>Monthly disposable income under § 707(b)(2).</b> Subtract Line 49 from Line 48 and enter the result	\$															
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.	\$															
52	<b>Initial presumption determination.</b> Check the applicable box and proceed as directed. <input type="checkbox"/> <b>The amount on Line 51 is less than \$7,475*</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. <input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$12,475*</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. <input type="checkbox"/> <b>The amount on Line 51 is at least \$7,475*, but not more than \$12,475*.</b> Complete the remainder of Part VI (Lines 53 through 55).																
53	<b>Enter the amount of your total non-priority unsecured debt</b>	\$															
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$															
55	<b>Secondary presumption determination.</b> Check the applicable box and proceed as directed. <input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. <input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.																
<b>PART VII. ADDITIONAL EXPENSE CLAIMS</b>																	
56	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.																
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 55%;">Expense Description</th> <th style="width: 40%;">Monthly Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td style="text-align: center;">c.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td></td> <td style="text-align: right;">Total: Add Lines a, b, and c</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table>			Expense Description	Monthly Amount	a.		\$	b.		\$	c.		\$		Total: Add Lines a, b, and c	\$
	Expense Description	Monthly Amount															
a.		\$															
b.		\$															
c.		\$															
	Total: Add Lines a, b, and c	\$															



**Part VIII: VERIFICATION**

57

I declare under penalty of perjury that the information provided in this statement is true and correct. *(If this a joint case, both debtors must sign.)*

Date: 9/15/2014 Signature: /s/ KELSEY R HILDERBRAND  
(Debtor)

Date: 9/15/2014 Signature: /s/ JENNIFER B. HILDERBRAND  
(Joint Debtor, if any )

\*Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

In re *KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND*Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	<b>Yes</b>	<b>1</b>	\$ <b>863,932.00</b>		
B-Personal Property	<b>Yes</b>	<b>4</b>	\$ <b>38,705.00</b>		
C-Property Claimed as Exempt	<b>Yes</b>	<b>2</b>			
D-Creditors Holding Secured Claims	<b>Yes</b>	<b>2</b>		\$ <b>1,231,533.91</b>	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	<b>Yes</b>	<b>3</b>		\$ <b>95,834.38</b>	
F-Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>27</b>		\$ <b>693,284.13</b>	
G-Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H-Codebtors	<b>Yes</b>	<b>1</b>			
I-Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>4,194.00</b>
J-Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ <b>3,952.00</b>
TOTAL		<b>43</b>	\$ <b>902,637.00</b>	\$ <b>2,020,652.42</b>	

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

In re *KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND*Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 32,000.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 63,834.38
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
<b>TOTAL</b>	<b>\$ 95,834.38</b>

State the following:

Average Income (from Schedule I, Line 12)	\$ 4,194.00
Average Expenses (from Schedule J, Line 22)	\$ 3,952.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 4,936.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 367,601.91
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$ 95,834.38	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 662,499.13
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 1,030,101.04

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND  
Debtor

Case No. \_\_\_\_\_  
(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 44 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 9/15/2014

Signature /s/ KELSEY R HILDERBRAND  
KELSEY R HILDERBRAND

Date: 9/15/2014

Signature /s/ JENNIFER B. HILDERBRAND  
JENNIFER B. HILDERBRAND

[If joint case, both spouses must sign.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

### CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11.U.S.C. § 110)

I certify that I am a bankruptcy preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Preparer:

Social security No. :

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

X \_\_\_\_\_

Date: \_\_\_\_\_

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
RESIDENCE LOCATED AT 2635 INDY LANE, WENATCHEE, WA 98801	HOME MORTGAGE		\$213,932.00	\$213,932.00
BUILDING 223 N. MISSION, WENATCHEE WA		J	\$650,000.00	\$650,000.00
<b>TOTAL \$</b>			863,932.00	

(Report also on Summary of Schedules.)

No continuation sheets attached

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE B-PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.		<b>CASH</b> <i>Location: In debtor's possession</i>	C	\$80.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>CHECKING ACCOUNT- CVB</b> <i>Location: CVB</i>	C	\$3,000.00
		<b>SAVINGS ACCOUNT- CVB</b> <i>Location: CVB</i>	C	\$100.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>4 BEDS, 2 DRESSERS, LINNENS, SIDE TABLE, FISH TANK, DESK AND CHAIR, TRUNK, COUCH, 3 BOOK SHELVES, 2 COMPUTERS (@3 AND 6 YRS OLD), PRINTER, PHONES, TV, @100 DVD's, COMPUTER DESK AND CHAIR, 3 COUCHES, COFFEE TABLE, END TABLE, KNICKKNACKS, WII AND GAMES, CLEANING SUPPLIES AND PRODUCTS, HOLIDAY DECORATIONS, PERSONAL CARE PRODUCTS AND SUPPLIES, SEWING MACHINE, LUGGAGE, KIDS TOYS, 2 TABLE AND CHAIRS, MISC COOKING SUPPLIES AND UTENSILS, SMALL KITCHEN APPLIANCES, REFRIGERATOR (@8 YRS OLD), FREEZER, WASHER AND DRYER (@8 YRS OLD), MISC HAND TOOLS, SSMALL HAND POWER TOOLS, SAW, LAWN AND GARDEN TOOLS, SUPPLIES AND EQUIPMENT, COMPRESSOR, LAWN FURNITURE, AIR HOCKEY (BROKEN)</b> <i>Location: DEBTOR'S POSSESSION</i>	C	\$5,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or		<b>READING BOOKS AND KIDS BOOKS (NO SIGNED OR COLLECTIBLE BOOKS)</b>	C	\$100.00

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property		Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
collectibles.		<i>Location: DEBTOR'S POSSESSION</i>		
		<i>FAMILY PHOTOS AND DECORATIVE PICTURES (NO SIGNED OR COLLECTIBLE ART) Location: DEBTOR'S POSSESSION</i>	C	\$25.00
6. Wearing apparel.		<i>CLOTHING Location: DEBTOR'S POSSESSION</i>	C	\$500.00
7. Furs and jewelry.		<i>WIFE'S WEDDING RING, HUSBAND'S WEDDING BAND, WIFE'S COSTUME JEWELRY Location: DEBTOR'S POSSESSION</i>	C	\$600.00
8. Firearms and sports, photographic, and other hobby equipment.		<i>DIGITAL CAMERA (@2 YRS OLD WITH FIXED LENS) Location: DEBTOR'S POSSESSION</i>	C	\$25.00
		<i>4 BIKES (\$200), SHOTGUN, PISTOL, GUN SAFE, FISHING TACKLE, HUNTING CLOTHING AND SUPPLIES, RELOADING SUPPLIES Location: DEBTOR'S POSSESSION</i>	C	\$1,200.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<i>LIFE INSURANCE POLICY (TERM) Location: FARMERS</i>	C	\$0.00
10. Annuities. Itemize and name each issuer.	X			
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		<i>401K Location: EDWARDS JONES</i>	C	\$800.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		<i>LLC MEMBERSHIP, HIGH MOUNTAIN HUNTING LLC Location: In debtor's possession</i>	C	Unknown
		<i>LLC MEMBERSHIP, HILDERCORP LLC (NO ASSETS, NO VALUE) Location: In debtor's possession</i>	C	\$0.00

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property		Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts Receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers and other vehicles and accessories.		<p>2000 DODGE DURANGO (128,000) NOT RUNNING. NEEDS @ \$2,500 IN REPAIRS) Location: DEBTOR'S POSSESSION</p> <p>2009 DODGE RAM PICKUP (109,000 MILES) Location: DEBTOR'S POSSESSION</p> <p>2010 YUKON DENALI Location: In debtor's possession</p> <p>TRAVEL TRAILER (REFRIGERATOR IS OUT AND HOT WATER HEATER TANK LEAKS) Location: DEBTOR'S POSSESSION</p>	<p>C</p> <p>C</p> <p>C</p> <p>C</p>	<p>\$2,500.00</p> <p>\$21,263.00</p> <p>Unknown</p> <p>\$3,500.00</p>



In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		4 GOLD FISH, 8 CHICKENS, DOG (6 YRS OLD AND SPAYED) Location: DEBTOR'S POSSESSION	C	\$12.00

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE C-PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds \$155,675.\*

(Check one box)

☒ 11 U.S.C. § 522(b) (2)☐ 11 U.S.C. § 522(b) (3)

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
RESIDENCE	11 USC 522(d)(1)	\$ 0.00	\$ 213,932.00
CASH	11 USC 522(d)(5)	\$ 80.00	\$ 80.00
CHECKING ACCOUNT- CVB	11 USC 522(d)(5)	\$ 3,000.00	\$ 3,000.00
SAVINGS ACCOUNT- CVB	11 USC 522(d)(5)	\$ 100.00	\$ 100.00
MISC HOUSEHOLDS AND FURNISHINGS	11 USC 522(d)(5)	\$ 5,000.00	\$ 5,000.00
BOOKS	11 USC 522(d)(3)	\$ 100.00	\$ 100.00
PICTURES	11 USC 522(d)(3)	\$ 25.00	\$ 25.00
CLOTHING	11 USC 522(d)(3)	\$ 500.00	\$ 500.00
JEWELRY	11 USC 522(d)(4)	\$ 600.00	\$ 600.00
CAMERA	11 USC 522(d)(3)	\$ 25.00	\$ 25.00
MISC SPORTING GOODS AND FIREARMS	11 USC 522(d)(3)	\$ 1,200.00	\$ 1,200.00
LIFE INSURANCE POLICY	11 USC 522(d)(7)	\$ 0.00	\$ 0.00
401K	11 USC 522(d)(10)(E)	\$ 800.00	\$ 800.00
2000 DODGE DURANGO	11 USC 522(d)(5)	\$ 2,500.00	\$ 2,500.00
2009 DODGE RAM PICKUP	11 USC 522(d)(2) 11 USC 522(d)(6)	\$ 7,350.00 \$ 4,600.00	\$ 21,263.00
Page No. <u>1</u> of <u>2</u>			

\* Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Co-Debtor H--Husband W--Wife J--Joint C--Community	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No:  <b>Creditor # : 1</b> <b>BANK OF AMERICA</b> <b>PO BOX 15220</b> <b>Wilmington DE 19886</b>	  <b>2010 YUKON DENALI</b>  Value: \$ 0.00					\$ 38,407.94	\$ 38,407.94
Account No:  <b>Creditor # : 2</b> <b>BANK OF AMERICA, NA</b> <b>PO BOX 650070</b> <b>Dallas TX 75262</b>	  <b>HOME MORTGAGE</b> <b>RESIDENCE</b>  Value: \$ 213,932.00					\$ 243,125.97	\$ 29,193.97
<b>Subtotal \$</b> (Total of this page)						\$ 281,533.91	\$ 67,601.91
<b>Total \$</b> (Use only on last page)							

1 continuation sheets attached

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien <div>Co-Debtor H--Husband W--Wife J--Joint C--Community</div>	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No:  <b>Creditor # : 3</b> <b>FOUNDATION BANK</b> <b>1110 112TH AVE NE</b> <b>SUITE 200</b> <b>Bellevue WA 98004</b>	<b>1ST and 2nd DOT</b>  <b>BUILDING 223 N. MISSIION</b>  Value: <b>\$ 650,000.00</b>				<b>\$ 950,000.00</b>	<b>\$ 300,000.00</b>
Account No:  	     Value:					
Account No:  	     Value:					
Account No:  	     Value:					
Account No:  	     Value:					
<b>Subtotal \$</b> (Total of this page) <b>Total \$</b> (Use only on last page)					<b>\$ 950,000.00</b>	<b>\$ 300,000.00</b>

 Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors  
 Holding Secured Claims

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☒ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

2 continuation sheets attached

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND ,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet: **Domestic Support Obligations**

Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred and Consideration for Claim	Contingent	Unliquidated	Disputed	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
Account No: <b>Creditor # : 1</b> <b>WA. STATE DEPT. OF REVENUE</b> <b>PO BOX 220</b> <b>Wenatchee WA 98807</b>	C	<b>SALES AND B&amp;O TAXES</b>				\$ 32,000.00	\$ 32,000.00	\$ 0.00
Account No:								
Account No:								
Account No:								
Account No:								
<b>Subtotal \$</b> (Total of this page)						<b>32,000.00</b>	<b>32,000.00</b>	<b>0.00</b>
<b>Total \$</b> (Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)								
<b>Total \$</b> (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and								

Sheet No. 1 of 2 continuation sheets  
attached to Schedule of Creditors Holding Priority Claims

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND ,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet: **Taxes and Certain Other Debts Owed to Governmental Units**

Creditor's Name, Mailing Address Including ZIP Code, and Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred and Consideration for Claim	Contingent	Unliquidated	Disputed	Amount of Claim	Amount Entitled to Priority	Amount not Entitled to Priority, if any
		H--Husband W--Wife J--Joint C--Community						
Account No: <b>Creditor # : 2</b> <b>EMPLOYMENT SECURITY DEPARTMENT</b> <b>PO BOX 9046</b> <b>Olympia WA 98507</b>		<b>PAYROLL TAXES</b>				\$ 301.05	\$ 301.05	\$ 0.00
Account No: <b>Creditor # : 3</b> <b>IRS</b> <b>PO BOX 145566</b> <b>Cincinnati OH 45250</b>		<b>OVERDUE TAXES</b>				\$ 51,745.33	\$ 51,745.33	\$ 0.00
Account No: <b>Representing:</b> <b>IRS</b>		<b>IRS</b> <b>PO BOX 9941</b> <b>STOP 5300</b> <b>Ogden UT 84409</b>						
Account No: <b>Creditor # : 4</b> <b>LABOR AND INDUSTRIES</b> <b>PO BOX 34022</b> <b>Seattle WA 98124</b>		<b>L&amp;I TAXES</b>				\$ 11,788.00	\$ 11,788.00	\$ 0.00
Account No:								
<b>Subtotal \$</b> (Total of this page)						63,834.38	63,834.38	0.00
<b>Total \$</b> (Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)						95,834.38		
<b>Total \$</b> (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and							95,834.38	0.00

Sheet No. 2 of 2 continuation sheets  
attached to Schedule of Creditors Holding Priority Claims



In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 1</b> <b>4K LIFT SERVICES, INC</b> <b>PO BOX 3239</b> <b>Wenatchee WA 98807</b>	H--Husband W--Wife J--Joint C--Community	<b>SERVICES</b>	X			<b>\$ 271.00</b>
Account No: <b>Creditor # : 2</b> <b>ABC COLLECTORS, INC.</b> <b>PO BOX 1099</b> <b>Kalispell MT 59903</b>		<b>COLLECTION ACCOUNT</b> <b>RE: NEMO ARMS</b>	X			<b>\$ 19,780.52</b>
Account No: <b>Creditor # : 3</b> <b>ACUSPORT CORP.</b> <b>ONE HUNTER PLACE</b> <b>Bellefontaine OH 43311</b>		<b>HUNTING SUPPLIES</b>				<b>\$ 25,347.42</b>
<b>Subtotal \$</b>						<b>\$ 45,398.94</b>
<b>Total \$</b>						

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

26 continuation sheets attached

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,  
Debtor(s)Case No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
H--Husband W--Wife J--Joint C--Community						
Account No:  <b>Representing:</b>  <b>ACUSPORT CORP.</b>		<b>STA INTERNATIONAL PO BOX 906 Prospect Heights IL 60070</b>				
Account No:  <b>Creditor # : 4 ALTUS GLOBAL TRADE SOLUTIONS 2400 VETERANS BLVD STE 300 Kenner LA 70062</b>		<b>COLLECTION ACCOUNT RE: CHERRY CREEK RADIO</b>	X			<b>Unknown</b>
Account No:  <b>Creditor # : 5 AMAZON / SYNCHRONY BANK PO BOX 960013 Orlando FL 32896</b>		<b>CREDIT CARD</b>				<b>\$ 2,651.05</b>
Account No:  <b>Representing:</b>  <b>AMAZON / SYNCHRONY BANK</b>		<b>SYNCHRONY BANK ATTN: BANKRUPTCY DEPT. PO BOX 965060 Orlando FL 32896</b>				
Account No:  <b>Creditor # : 6 AMERICAN EXPRESS P.O. BOX 650448 Dallas TX 75265</b>		<b>CREDIT CARD</b>				<b>\$ 2,136.27</b>
Sheet No. <u>1</u> of <u>26</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal \$</b> <b>Total \$</b> (Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

**\$ 4,787.32**

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:						
Representing:  AMERICAN EXPRESS		NATIONWIDE CREDIT, INC. PO BOX 26314 Lehigh Valley PA 18002				
Account No:						\$ 36,991.07
Creditor # : 7 ANDERSON, RANDALL & RICHARDS 3001 19TH STREET Metairie LA 70002		COLLECTION ACCOUNT RE: ALL SPORTS, LLC				
Account No:			X			\$ 5,336.68
Creditor # : 8 ARMADA CORP PO BOX 709 Wenatchee WA 98807		COLLECTION ACCOUNTS RE: JACKSON HOLE SODA, CONSOLIDATED DISPOSAL & JUSTIN HOPE.				
Account No:			X			\$ 1,305.50
Creditor # : 9 AXION ARCHERY 1324 UNION HILL ROAD SUITE C Alpharetta GA 30004		BUSINESS SUPPLIES				
Account No:						
Representing:  AXION ARCHERY		INTERREGIONAL CREDIT SYSTEMS PO BOX 1059 Anoka MN 55303				

Sheet No. 2 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 43,633.25

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:  <b>Representing:</b>  <b>AXION ARCHERY</b>		<b>H--Husband</b> <b>W--Wife</b> <b>J--Joint</b> <b>C--Community</b>  <b>PLOVIE LAW FIRM, PS</b> <b>PO BOX 878</b> <b>Redmond WA 98073</b>				
Account No:  <b>Creditor # : 10</b> <b>BANK OF AMERICA</b> <b>PO BOX 851001</b> <b>Dallas TX 75285</b>		<b>2 CREDIT CARDS</b>				<b>\$ 14,620.91</b>
Account No:  <b>Creditor # : 11</b> <b>BENELLI USA</b> <b>PO BOX 64671</b> <b>Baltimore MD 21264</b>		<b>SALES ORDERS</b>	<b>X</b>			<b>\$ 3,420.56</b>
Account No:  <b>Creditor # : 12</b> <b>BRETT &amp; SON, INC.</b> <b>1350 WALNUT STREET</b> <b>Wenatchee WA 98801</b>		<b>SERVICES RENDERED</b>	<b>X</b>			<b>\$ 253.22</b>
Account No:  <b>Creditor # : 13</b> <b>BUSINESS LICENSING SERVICE</b> <b>PO BOX 9034</b> <b>Olympia WA 98507</b>		<b>RETURNED CHECK</b> <b>RE: WHEATLAND BANK</b>	<b>X</b>			<b>\$ 96.00</b>

Sheet No. 3 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

**Subtotal \$****\$ 18,390.69****Total \$**

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 14</b> <b>CAPITAL MANAGEMENT SERVICES, LP</b> <b>698 1/2 SOUTH OGDEN ST.</b> <b>Buffalo NY 14206</b>	H--Husband W--Wife J--Joint C--Community	<b>COLLECTION ACCOUNT</b> <b>RE: DISCOVER BANK</b>				<b>\$ 11,187.83</b>
Account No: <b>Creditor # : 15</b> <b>CAPITAL MANAGEMENT SERVICES, LP</b> <b>698 1/2 SOUTH OGDEN STREET</b> <b>Buffalo NY 14206</b>		<b>COLLECTON ACCOUNT</b> <b>RE: DISCOVER BANK</b>				<b>\$ 11,326.63</b>
Account No: <b>Creditor # : 16</b> <b>CAPITAL ONE BANK, USA NA</b> <b>PO BOX 60599</b> <b>City of Industry CA 91716</b>		<b>CREDIT CARD</b>				<b>\$ 16,518.22</b>
Account No: <b>Creditor # : 17</b> <b>CASCADE AUTO CENTER</b> <b>PO BOX 2987</b> <b>Wenatchee WA 98807</b>			X			<b>\$ 1,000.00</b>
Account No: <b>Creditor # : 18</b> <b>CASCADE QUALITY WATER CENTER</b> <b>PO BOX 2199</b> <b>Wenatchee WA 98807</b>		<b>WATER COOLER RENTAL</b>	X			<b>\$ 290.13</b>

Sheet No. 4 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 40,322.81**

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 19</b> <b>CENTRAL BONDED COLLECTORS</b> <b>PO BOX 1073</b> <b>Moses Lake WA 98837</b>	H--Husband W--Wife J--Joint C--Community	<b>COLLECTION ACCOUNT</b> <b>RE: SAMARITAN HOSPITAL</b>			X	\$ 319.29
Account No: <b>Creditor # : 20</b> <b>CENTRAL WASHINGTON HOSPITAL</b> <b>PO BOX 143</b> <b>Spokane WA 99210</b>		<b>MEDICAL BILL</b>				\$ 610.94
Account No: <b>Creditor # : 21</b> <b>CENTURY LINK</b> <b>PO BOX 91155</b> <b>Seattle WA 98111</b>		<b>TELEPHONE SERVICE</b>	X			\$ 1,122.70
Account No: <b>Creditor # : 22</b> <b>CHARTER ARMS</b> <b>18 BREWSTER LANE</b> <b>Shelton CT 06484</b>		<b>GUNS</b> <b>RE: CLAIM NO. 10723</b>				\$ 1,524.00
Account No: <b>Creditor # : 23</b> <b>CHASE CARDMEMBER SERVICE</b> <b>PO BOX 94014</b> <b>Palatine IL 60094</b>		<b>3 CREDIT CARDS</b>				\$ 57,799.77

Sheet No. 5 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$** \$ 61,376.70**Total \$**(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 24</b> <b>CHELAN COUNTY PUD</b> <b>P.O. BOX 1231</b> <b>Wenatchee WA 98801</b>		<b>UTILITIES</b>				<b>\$ 1,118.25</b>
Account No: <b>Creditor # : 25</b> <b>CHEVRON / GEGRB</b> <b>PO BOX 530950</b> <b>Atlanta GA 30353</b>		<b>CREDIT CARD</b>				<b>\$ 887.18</b>
Account No: <b>Creditor # : 26</b> <b>CHRIS FOSTER</b> <b>7797 FISH HATCHERY RD</b> <b>Leavenworth WA 98826</b>		<b>GUN ON CONSIGNMENT</b>	<b>X</b>			<b>Unknown</b>
Account No: <b>Creditor # : 27</b> <b>CHRISTENSEN ARMS</b> <b>PO BOX 240</b> <b>Gunnison UT 84634</b>						<b>\$ 30,285.00</b>
Account No: <b>Creditor # : 28</b> <b>CISCO, INC.</b> <b>PO BOX 801088</b> <b>Houston TX 77280</b>		<b>COLLECTION ACCOUNT</b> <b>RE: ZEBCO A. WC BRADLEY CO.</b>				<b>\$ 2,147.73</b>

Sheet No. 6 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 34,438.16**

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 29</b> <b>CITY OF MOSES LAKE</b> <b>PO BOX 1579</b> <b>Monitor WA 98836</b>		<b>UTILITY SERVICE</b>				\$ 513.80
Account No: <b>Creditor # : 30</b> <b>CITY OF WENATCHEE</b> <b>PO BOX 519</b> <b>Wenatchee WA 98807</b>		<b>UTILITY BILL</b>				\$ 353.98
Account No: <b>Creditor # : 31</b> <b>CLEAN CONNECTION</b> <b>10 FIFTH STREET</b> <b>Wenatchee WA 98807</b>		<b>CARPET CLEANING</b>	X			\$ 306.00
Account No: <b>Creditor # : 32</b> <b>COFACE COLLECTIONS NORTH</b> <b>AMERICA, INC.</b> <b>PO BOX 1389</b> <b>Kenner LA 70063</b>		<b>COLLECTION ACCOUNT</b> <b>RE: NORTHLAND FISHING TACKLE INC.</b>				\$ 2,689.83
Account No: <b>Creditor # : 33</b> <b>COLLECTION BUREAU OF AMERICA</b> <b>PO BOX 5013</b> <b>Hayward CA 94540</b>		<b>COLLECTION ACCOUNTS</b> <b>RE: DS SERVICES</b>	X			\$ 612.53

Sheet No. 7 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 4,476.14

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related



In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 34</b> <b>COLUMBIA BASIN HERALD</b> <b>PO BOX 910</b> <b>Moses Lake WA 98837</b>		<b>ADVERTISING</b>	X			\$ 11,130.90
Account No: <b>Creditor # : 35</b> <b>CONSOLIDATED DISPOSAL SERVICES,</b> <b>INC.</b> <b>PO BOX 1154</b> <b>Ephrata WA 98823</b>		<b>GARBAGE SERVICE</b>				\$ 276.29
Account No: <b>Creditor # : 36</b> <b>CORDELL, NEHER &amp; COMPANY</b> <b>PO BOX 3068</b> <b>Wenatchee WA 98807</b>		<b>ACCOUNTING BILL</b>				\$ 1,095.20
Account No: <b>Creditor # : 37</b> <b>DAVID SPARKS</b> <b>12238 N. FRONTAGE RD</b> <b>Moses Lake WA 98837</b>	C					Unknown
Account No: <b>Creditor # : 38</b> <b>DELTA MCKENZIE TARGETS</b> <b>30151 - 160TH STREET</b> <b>Dike IA 50624</b>	C					Unknown

Sheet No. 8 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ **\$ 12,502.39**

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 39</b> <b>DEVRIES GLOBAL</b> <b>909 THIRD AVENUE</b> <b>New York NY 10022</b>	C					<i>Unknown</i>
Account No: <b>Creditor # : 40</b> <b>DEX MEDIA</b> <b>PO BOX 79167</b> <b>Phoenix AZ 85062</b>		<b>ADVERTISING</b>				<b>\$ 554.35</b>
Account No: <b>Creditor # : 41</b> <b>DISCOVER CARD</b> <b>PO BOX 3007</b> <b>NEW ALBANY OH 43054-3007</b>	C	<b>CREDIT CARD</b>				<i>Unknown</i>
Account No: <b>Creditor # : 42</b> <b>DUEL GAME CALLS</b> <b>235 MIDDLE ROAD</b> <b>Henrietta NY 14467</b>	C	<b>STORE PRODUCT</b>				<i>Unknown</i>
Account No: <b>Creditor # : 43</b> <b>EASTON ARCHERY</b> <b>5040 HAROLD GATTY DR.</b> <b>Salt Lake City UT 84116</b>	C	<b>STORE PRODUCT</b>				<i>Unknown</i>

Sheet No. 9 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

**\$ 554.35**

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:						
Creditor # : 44 EDWARD JONES PO BOX 3383 Wenatchee WA 98807		RETIREMENT FEE				\$ 40.00
Account No:						
Creditor # : 45 ELLETT BROTHERS PO BOX 128 Chapin SC 29036		BUSINESS SUPPLIES				\$ 38,518.69
Account No:						
Representing:  ELLETT BROTHERS		LAW OFFICE OF MICHAEL LOVEJOY PO BOX 25340 Seattle WA 98165				
Account No:						
Representing:  ELLETT BROTHERS		CST CO. INCORPORATED PO BOX 33127 Louisville KY 40232				
Account No:						
Creditor # : 46 ESCALADE ARCHERY 817 MAXWELL AVENUE Evansville IN 47711	C					Unknown

Sheet No. 10 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$ \$ 38,558.69

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:	C	H--Husband W--Wife J--Joint C--Community				Unknown
Creditor # : 47 EVERGREEN ACCOUNTING 227 OHME GARDEN RD Wenatchee WA 98801						
Account No:		TRUCK INSURANCE				\$ 495.20
Creditor # : 48 FARMERS INSURANCE PAYMENT PROCESSING CENTER PO BOX 894883 Los Angeles CA 90189						
Account No:		BUSINESS SUPPLIES	X			\$ 6,508.06
Creditor # : 49 FERADYNE OUTDOORS LLC 110 BEASLEY ROAD Cartersville GA 30120						
Account No:		INTERREGIONAL CREDIT SYSTEMS PO BOX 1059 Anoka MN 55303				
Representing:  FERADYNE OUTDOORS LLC						
Account No:		PLOVIE LAW FIRM, PS PO BOX 878 Redmond WA 98073				
Representing:  FERADYNE OUTDOORS LLC						

Sheet No. 11 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$ \$ 7,003.26

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address  including Zip Code,  And Account Number <i>(See instructions above.)</i>	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.		Contingent	Unliquidated	Disputed	Amount of Claim
		H--Husband W--Wife J--Joint C--Community					
Account No:							\$ 44,521.00
Creditor # : 50 FINANCIAL PACIFIC LEASE 3455 SOUTH 344 WAY SUITE 300 Auburn WA 98001			SECURITY SYSTEM & POS SYSTEM				
Account No:							\$ 8,002.21
Creditor # : 51 FINANCIAL PACIFIC LEASING, INC. 3455 S 344 WAY, #300 Auburn WA 98001							
Account No:		C					Unknown
Creditor # : 52 FLYING ARROW 251 SUNFIELD DR., #3 Belgrade MT 59714			STORE PRODUCT				
Account No:							\$ 18,574.28
Creditor # : 53 FULL CIRCLE FINANCE 11 SPOKANE ST SUITE 306 Wenatchee WA 98801			DEFAULT OF AGREEMENT				
Account No:		C					Unknown
Creditor # : 54 G&H OUTDOORS 1810 EAST MAIN SUITE A Madisonville TX 77864			STORE PRODUCT				

Sheet No. 12 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 71,097.49

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: Creditor # : 55 GE CAPITAL P.O. BOX 965013 Orlando FL 32896		CREDIT CARD				Unknown
Account No: Creditor # : 56 GE CAPITAL P.O. BOX 965004 Orlando FL 32896		CREDIT CARDS				Unknown
Account No: Creditor # : 57 GRANT COUNTY FAIRGROUNDS 3953 AIRWAY DR NE Moses Lake WA 98837	C					Unknown
Account No: Creditor # : 58 GRANT COUNTY POWERNET 236 S. ASH STREET Moses Lake WA 98837	C					Unknown
Account No: Creditor # : 59 GRANT COUNTY PUBLIC UTILITY DIST CUSTOMER SERVICE PO BOX 878 Ephrata WA 98823		UTILITIES				\$ 941.79

Sheet No. 13 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 941.79

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: Creditor # : 60 GRAVITY PAYMENTS 1455 NW LEARY WAY SUITE 200 Seattle WA 98107		UNPAID FEES				\$ 50.00
Account No: Creditor # : 61 GREENBERG, GRANT & RICHARDS, INC. PO BOX 571811 Houston TX 77257		COLLECTION ACCOUNT RE: WERKS LTD				\$ 3,751.69
Account No: Creditor # : 62 GROVTEC US, INC. PO BOX 220060 Portland OR 97269	C					Unknown
Account No: Creditor # : 63 GUNARAMA WHOLESALE, INC. PO BOX 3605 Spokane WA 99220-3333	C					Unknown
Account No: Creditor # : 64 HAGADONE DIRECTORIES P.O. BOX 1266 Coeur d Alene ID 83816		ADVERTISING				\$ 8,696.21

Sheet No. 14 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$ \$ 12,497.90

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:  <b>Representing:</b>  <b>HAGADONE DIRECTORIES</b>		<b>H--Husband</b> <b>W--Wife</b> <b>J--Joint</b> <b>C--Community</b>  <b>OLDE CITY FINANCIAL, INC.</b> <b>PO BOX 800</b> <b>Wayne PA 19087</b>				
Account No:  <b>Representing:</b>  <b>HAGADONE DIRECTORIES</b>		<b>COFACE COLLECTIONS N. AMERICA</b> <b>PO BOX 1389</b> <b>Kenner LA 70063</b>				
Account No:  <b>Creditor # : 65</b> <b>HOME DEPOT CREDIT SERVICES</b> <b>PROCESSING CENTER</b> <b>Des Moines IA 50364</b>		<b>CREDIT CARD</b>				<b>\$ 1,389.84</b>
Account No:  <b>Creditor # : 66</b> <b>INTERREGIONAL CREDIT SYSTEMS,</b> <b>INC.</b> <b>PO BOX 1059</b> <b>Anoka MN 55303</b>		<b>COLLECTION ACCOUNT</b> <b>RE: MATHEWS ARCHERY, INC.</b>	<b>X</b>			<b>\$ 2,898.00</b>
Account No:  <b>Creditor # : 67</b> <b>JEFFERS, DANIELSON, SONN &amp;</b> <b>AYLWARD</b> <b>PO BOX 1688</b> <b>Wenatchee WA 98807</b>		<b>ATTORNEY FEES</b>				<b>\$ 3,897.34</b>

Sheet No. 15 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$****\$ 8,185.18****Total \$**(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related



In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:  <b>Creditor # : 68</b> <b>JOANNE WEBB</b> <b>C/O CHARLES STEINBERG LAW FIRM</b> <b>323 NORTH MILLER STREET</b> <b>Wenatchee WA 98801</b>		<b>SUMMONS &amp; COMPLAINT</b>	X			<i>Unknown</i>
Account No:  <b>Creditor # : 69</b> <b>JUSTIN HOPE</b> <b>2318 VEDOL DR.</b> <b>98802</b>	C	<b>SMALL CLAIMS JUDGEMENT</b>				<b>\$ 1,937.29</b>
Account No:  <b>Creditor # : 70</b> <b>KENCO EQUIPMENT LEASE CO</b> <b>PO BOX 220</b> <b>Tualatin OR 97062</b>		<b>LEASE DEFAULT</b>				<b>\$ 5,622.62</b>
Account No:  <b>Creditor # : 71</b> <b>KEYHOLE SECURITY</b> <b>238 S. WENATCHEE AVE.</b> <b>Wenatchee WA 98801</b>		<b>SECURITY SYSTEM</b>	X			<b>\$ 253.11</b>
Account No:  <b>Creditor # : 72</b> <b>KTECH DESIGNS, LLC</b> <b>PO BOX 455</b> <b>Davison MI 48423</b>			X			<b>\$ 545.22</b>

Sheet No. 16 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

**Subtotal \$****\$ 8,358.24****Total \$**

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 73</b> <b>LARRY MAIN</b> <b>Moses Lake WA 98837</b>		<b>GUN ON CONSIGNMENT</b>	X			<b>Unknown</b>
Account No: <b>Creditor # : 74</b> <b>LAW OFFICE OF J. MICHAEL</b> <b>LOVEJOY, PS</b> <b>PO BOX 25340</b> <b>Seattle WA 98165</b>		<b>COLLECTION ACCOUNT</b> <b>RE: CHERRY CREEK RADIO ADVERTISING</b>				<b>\$ 13,562.35</b>
Account No: <b>Creditor # : 75</b> <b>LOCAL TEL</b> <b>343 GRANT ROAD</b> <b>East Wenatchee WA 98802</b>		<b>INTERNET SERVICE</b>				<b>\$ 1,043.43</b>
Account No: <b>Creditor # : 76</b> <b>LOWES</b> <b>ATTN: BANKRUPTCY DEPT</b> <b>PO BOX 103104</b> <b>Roswell GA 30076</b>		<b>CREDIT CARD</b>				<b>\$ 3,364.11</b>
Account No: <b>Creditor # : 77</b> <b>MATHEWS SOLO CAM</b> <b>PO BOX 367</b> <b>Sparta WI 54656</b>		<b>NSF CHECKS</b>				<b>\$ 2,898.00</b>

Sheet No. 17 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$** **\$ 20,867.89****Total \$**(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:  Creditor # : 78 MONEYTREE PO BOX 58363 Seattle WA 98138		PAYDAY LOAN	X			\$ 936.17
Account No:  Creditor # : 79 MORRELL MANUFACTURING, INC. 1721 HWY 71 NORTH Alma AR 72921		BUSINESS SUPPLIES	X			\$ 518.10
Account No:  Representing:  MORRELL MANUFACTURING, INC.		INTERREGIONAL CREDIT SYSTEMS PO BOX 1059 Hubertus WI 53033				
Account No:  Representing:  MORRELL MANUFACTURING, INC.		PLOVIE LAW FIRM, PS PO BOX 878 Redmond WA 98073				
Account No:  Creditor # : 80 NEC FINANCIAL SERVICES 250 PEHLE AVE, SUITE 704 Saddle Brook NJ 07663		COLLECTION ACCOUNT				\$ 1,288.26

Sheet No. 18 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 2,742.53

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 81</b> <b>NEC FINANCIAL SERVICES, LLC</b> <b>PO BOX 100558</b> <b>Pasadena CA 91189</b>						\$ 1,584.15
Account No: <b>Creditor # : 82</b> <b>NEW YORK LIFE</b> <b>PO BOX 500</b> <b>Minneapolis MN 55440</b>		<b>LIFE INSURANCE</b>	X			\$ 780.24
Account No: <b>Creditor # : 83</b> <b>NORDSTROM BANK</b> <b>PO BOX 79137</b> <b>Phoenix AZ 85062</b>		<b>STORE ACCOUNT</b>				\$ 14,549.35
Account No: <b>Creditor # : 84</b> <b>NORTHWEST HYDROPRINT</b> <b>305 W. ARLAND AVE.</b> <b>Montesano WA 98563</b>		<b>BUSINESS SUPPLIES</b>	X			\$ 618.02
Account No: <b>Creditor # : 85</b> <b>NUMERICA CREDIT UNION</b> <b>PO BOX 4000</b> <b>Veradale WA 99037</b>		<b>DEPT OF REV LEVY</b>				\$ 32,850.45

Sheet No. 19 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 50,382.21

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 86</b> <b>PALADIN COMMERCIAL GROUP</b> <b>12200 E. BRIARWOOD AVE.</b> <b>SUITE 250</b> <b>Englewood CO 80112</b>		<b>COLLECTION ACCOUNT</b> <b>RE: LEGACY SPORTS INTERNATIONAL</b>				<b>\$ 34,320.00</b>
Account No: <b>Creditor # : 87</b> <b>PARAMOUNT PAYMENT SYSTEMS</b> <b>21214 SCHOFIELD DR</b> <b>Gretna NE 68028</b>		<b>CREDIT CARD MACHINE</b>				<b>Unknown</b>
Account No: <b>Creditor # : 88</b> <b>PATRICK SCHOTT</b> <b>1608 MCKITTRICK ST</b> <b>Wenatchee WA 98801</b>		<b>GUN ON CONSIGNMENT</b>	<b>X</b>			<b>\$ 1,200.00</b>
Account No: <b>Creditor # : 89</b> <b>PAYPAL CREDIT SVCS / SYNCB</b> <b>PO BOX 960080</b> <b>Orlando FL 32896</b>		<b>CREDIT CARD</b>				<b>\$ 4,792.24</b>
Account No: <b>Creditor # : 90</b> <b>PHILLIPS 66 CO / SYNCB</b> <b>PO BOX 530942</b> <b>Atlanta GA 30353</b>		<b>CREDIT CARD</b>				<b>\$ 767.04</b>

Sheet No. 20 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 41,079.28

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 91</b> <b>PLOVIE LAW FIRM, PS</b> <b>PO BOX 878</b> <b>Redmond WA 98073</b>		<b>COLLECTION ACCOUNT</b> <b>RE: ESCALADE SPORTS</b>				<b>\$ 14,432.03</b>
Account No: <b>Creditor # : 92</b> <b>RSR GROUP, INC.</b> <b>4405 METRIC DRIVE</b> <b>Winter Park FL 32792</b>		<b>RETURNED CHECKS</b>				<b>\$ 3,676.86</b>
Account No: <b>Creditor # : 93</b> <b>SCOTT ARCHERY, LLC</b> <b>CLAY CITY</b> <b>Clay City KY 40312</b>		<b>INVOICE #14215</b>				<b>\$ 1,730.00</b>
Account No: <b>Creditor # : 94</b> <b>SHELL</b> <b>PO BOX 183018</b> <b>Columbus OH 43218</b>		<b>CREDIT CARD</b>				<b>\$ 599.60</b>
Account No: <b>Creditor # : 95</b> <b>SHELL</b> <b>PO BOX 183018</b> <b>Columbus OH 43218</b>		<b>CREDIT CARD</b>				<b>\$ 507.02</b>

Sheet No. 21 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$

\$ 20,945.51

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: <b>Creditor # : 96</b> <b>SHIMANO AMERICAN CORP</b> <b>ONE HOLLAND</b> <b>Irvine CA 92618</b>		<b>SALES PRODUCT</b>				<b>\$ 2,560.53</b>
Account No: <b>Creditor # : 97</b> <b>SILK SCREEN PRINTERS</b> <b>3 ORONDO AVE</b> <b>Wenatchee WA 98801</b>		<b>PRINTING JOB</b>	<b>X</b>			<b>\$ 236.26</b>
Account No: <b>Creditor # : 98</b> <b>SLATER, TENAGLIA, FRITZ &amp; HUNT,</b> <b>PA</b> <b>PO BOX 8500</b> <b>Philadelphia PA 19178</b>		<b>COLLECTION ACCOUNT</b> <b>RE: HICKS, INC.</b>	<b>X</b>			<b>\$ 2,310.22</b>
Account No: <b>Creditor # : 99</b> <b>SPIKE'S TACTICAL, LLC</b> <b>2036 APEX COURT</b> <b>Apopka FL 32703</b>		<b>BUSINESS SUPPLIES</b>	<b>X</b>			<b>\$ 4,840.00</b>
Account No: <b>Creditor # : 100</b> <b>STATE OF WASHINGTON DEPT. OF</b> <b>REVENUE</b> <b>PO BOX 220</b> <b>Wenatchee WA 98807</b>						<b>\$ 58,769.90</b>

Sheet No. 22 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$** **\$ 68,716.91****Total \$**(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,

Case No. \_\_\_\_\_

Debtor(s)

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:						
Creditor # : 101 STOEGER INDUSTRIES PO BOX 64192 Baltimore MD 21264		SALES PRODUCT				\$ 7,421.45
Account No:						
Creditor # : 102 STRIKE KING LURE 466 WASHINGTON STREET Collierville TN 38017		BUSINESS SUPPLIES				\$ 5,162.17
Account No:						
Representing:  STRIKE KING LURE		CCC OF NY PO BOX 288 Tonawanda NY 14151				
Account No:						
Creditor # : 103 THE HUNTING SHACK, INC. 4406 RATHBUN LANE Stevensville MT 59870		BUSINESS SUPPLIES				\$ 23,518.05
Account No:						
Creditor # : 104 TICA FISHING TACKLE USA, INC. 6952 SOUTH 220TH STREET Kent WA 98032		BUSINESS SUPPLIES	X			\$ 1,607.41

Sheet No. 23 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ \$ 37,709.08

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related



In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:						
Representing:  TICA FISHING TACKLE USA, INC.		CCC OF NY PO BOX 288 Tonawanda NY 14151				
Account No:						\$ 662.00
Creditor # : 105 TRAVELERS PO BOX 660317 Dallas TX 75266		INSURANCE				
Account No:						
Representing:  TRAVELERS		RMS PO BOX 26446 Henrico VA 23233				
Account No:						\$ 50.95
Creditor # : 106 TSYS MERCHANT SOLUTIONS PO BOX 3190 Omaha NE 68103		CREDIT CARD AGMT				
Account No:						\$ 989.81
Creditor # : 107 U.S. IMPACT, INC. PO BOX 1746 Mandeville LA 70470		COLLECTION ACCOUNT RE: LIPSEY'S INC.				

Sheet No. 24 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$ \$ 1,702.76

Total \$

(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:  <b>Creditor # : 108</b> <b>UPS</b> <b>PO BOX 894820</b> <b>Los Angeles CA 90189</b>		<b>DELIVERY SERVICES</b>	X			\$ 488.16
Account No:  <b>Representing:</b>  <b>UPS</b>		<b>NCO FINANCIAL</b> <b>PO BOX 9186</b> <b>Dublin OH 43017</b>				
Account No:  <b>Creditor # : 109</b> <b>US BANK</b> <b>P.O. BOX 790408</b> <b>Saint Louis MO 63179</b>		<b>CREDIT LINE</b>				\$ 876.96
Account No:  <b>Creditor # : 110</b> <b>WASTE MANAGEMENT OF WENATCHEE</b> <b>PO BOX 541065</b> <b>Los Angeles CA 90054</b>		<b>DISPOSAL SERVICE</b>				\$ 722.85
Account No:  <b>Representing:</b>  <b>WASTE MANAGEMENT OF WENATCHEE</b>		<b>RMS</b> <b>PO BOX 509</b> <b>Richfield OH 44286</b>				

Sheet No. 25 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$** \$ 2,087.97**Total \$**(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND,Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No:						
Representing:  WASTE MANAGEMENT OF WENATCHEE		HIGH MOUNTAIN HUNTING 2625 W. GRAND VIEW RD Phoenix AZ 85023				
Account No:			X			\$ 3,741.69
Creditor # : 111 WERKZ LTD. 360 BUNYAN AVE. Berthoud CO 80513		BUSINESS SUPPLIES				
Account No:						
Representing:  WERKZ LTD.		LOVIK & JUHL, PLLC 1707 N. 45TH STREET SUITE 100 Seattle WA 98103				
Account No:						
Account No:						

Sheet No. 26 of 26 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$ \$ 3,741.69Total \$ \$ 662,499.13(Use only on last page of the completed Schedule F. Report also on Summary of  
Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if the debtor has no executory contracts or unexpired leases.

<b>Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.</b>	<b>Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.</b>

In re KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE H-CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

**Fill in this information to identify your case:**

Debtor 1 KELSEY R HILDERBRAND  
 First Name Middle Name Last Name

Debtor 2 JENNIFER B. HILDERBRAND  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN District of WASHINGTON

Case number \_\_\_\_\_  
 (If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

# **Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## **Part 1: Describe Employment**

### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

#### **Employment status**

- ☐ Employed
- ☒ Not employed

#### **Occupation**

#### **Employer's name**

#### **Employer's address**

Number Street

City State ZIP Code

#### **How long employed there?**

#### **Debtor 2 or non-filing spouse**

- ☒ Employed
- ☐ Not employed

DESIGNER

CONCEPT DESIGNS

Number Street

WENATCHEE WA 98801  
 City State ZIP Code

2 1/2 MONTHS

## **Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>0.00</u>	\$ <u>3,200.00</u>
3. Estimate and list monthly overtime pay.	+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	\$ <u>0.00</u>	\$ <u>3,200.00</u>

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here..... → 4.	\$ 0.00	\$ 0.00	
<b>5. List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ 0.00	
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ 0.00	
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ 0.00	
5d. Required repayments of retirement fund loans	\$ 0.00	\$ 0.00	
5e. Insurance	\$ 0.00	\$ 0.00	
5f. Domestic support obligations	\$ 0.00	\$ 0.00	
5g. Union dues	\$ 0.00	\$ 0.00	
5h. Other deductions. Specify: _____	+\$ 0.00	+\$ 0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$ 0.00	\$ 742.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 0.00	\$ 2458.00	
<b>8. List all other income regularly received:</b>			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 0.00	\$ 0.00	
8b. Interest and dividends	\$ 0.00	\$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ 0.00	
8d. Unemployment compensation	\$ 0.00	\$ 0.00	
8e. Social Security	\$ 0.00	\$ 0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	\$ 0.00	\$ 0.00	
8g. Pension or retirement income	\$ 0.00	\$ 0.00	
8h. Other monthly income. Specify: HUSBAND'S MOTHER CONTRIBUTION	+\$ 1736.00	+\$ 0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$ 1736.00	\$ 0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 1,736.00	\$ 2,458.00	= \$ 4194.00
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____			
		11. + \$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		\$ 4194.00	12. Combined monthly income
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>			
<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: HUSBAND EXPECTS TO FIND EMPLOYMENT TO REPLACE MONTHLY CONTRIBUTION. HUSBAND PLANS TO WORK AS SPORT GUIDE			



**Fill in this information to identify your case:**

Debtor 1 KELSEY R HILDERBRAND  
First Name Middle Name Last Name

Debtor 2 JENNIFER B. HILDERBRAND  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN District of WASHINGTON

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:  
 \_\_\_\_\_  
 MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

**Official Form B 6J**

**Schedule J: Your Expenses**

12/13

**Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.**

**Part 1:** Describe Your Household

**1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☒ Yes. Fill out this information for each dependent.....

**Dependent's relationship to Debtor 1 or Debtor 2**

**Dependent's age**

**Does dependent live with you?**

SON

10

☐ No  
☒ Yes

DAUGHTER

8

☐ No  
☒ Yes

DAUGHTER

8

☐ No  
☒ Yes

☐ No  
☐ Yes

☐ No  
☐ Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

☒ No  
☐ Yes

**Part 2:** Estimate Your Ongoing Monthly Expenses

**Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.**

**Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)**

**4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

**Your expenses**

4. \$ 1736.00

**If not included in line 4:**

4a. Real estate taxes	4a. \$ 0.00
4b. Property, homeowner's, or renter's insurance	4b. \$ 0.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$ 0.00
4d. Homeowner's association or condominium dues	4d. \$ 0.00



		Your expenses
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	\$ 0.00
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	\$ 120.00
6b.	Water, sewer, garbage collection	\$ 30.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	\$ 240.00
6d.	Other. Specify: _____	\$ 0.00
7.	<b>Food and housekeeping supplies</b>	\$ 500.00
8.	<b>Childcare and children's education costs</b>	\$ 50.00
9.	<b>Clothing, laundry, and dry cleaning</b>	\$ 100.00
10.	<b>Personal care products and services</b>	\$ 50.00
11.	<b>Medical and dental expenses</b>	\$ 100.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	\$ 400.00
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	\$ 100.00
14.	<b>Charitable contributions and religious donations</b>	\$ 0.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	\$ 40.00
15b.	Health insurance	\$ 320.00
15c.	Vehicle insurance	\$ 166.00
15d.	Other insurance. Specify: _____	\$ 0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	\$ 0.00
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	\$ 0.00
17b.	Car payments for Vehicle 2	\$ 0.00
17c.	Other. Specify: _____	\$ 0.00
17d.	Other. Specify: _____	\$ 0.00
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).</b>	\$ 0.00
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	\$ 0.00
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.</b>	
20a.	Mortgages on other property	\$ 0.00
20b.	Real estate taxes	\$ 0.00
20c.	Property, homeowner's, or renter's insurance	\$ 0.00
20d.	Maintenance, repair, and upkeep expenses	\$ 0.00
20e.	Homeowner's association or condominium dues	\$ 0.00

21. **Other.** Specify: \_\_\_\_\_

21. **+\$** \_\_\_\_\_ 0.00

22. **Your monthly expenses.** Add lines 4 through 21.

The result is your monthly expenses.

22. \$ \_\_\_\_\_ 3952.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ \_\_\_\_\_ 4194.00

23b. Copy your monthly expenses from line 22 above.

23b. **−**\$ \_\_\_\_\_ 3952.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$ \_\_\_\_\_ 242.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: WHEN HUSBAND GAINS EMPLOYMENT, PARTIES WILL INCUR DAYCARE COSTS

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

In re: **KELSEY R HILDERBRAND**

Case No. \_\_\_\_\_

**and**

(if known)

**JENNIFER B. HILDERBRAND**

Debtor

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor may also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

**Year to date: 9,898****WIFES WAGES****Last Year: 0****Year before: 0****Year to date: \$12,259****HUSBAND'S WAGES****Last Year: 26,872.38****SAME****Year before: 33,064****SAME**

### 2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

Year to date:

Last Year:

Year before: 147,447

IRA DISTRIBUTION

Year to date:

Last Year:

Year before: -365,797

CARRYBACK BUSINESS LOSS

Year to date:

Last Year:

Year before: 37,429

RENTAL INCOME

Year to date:

Last Year:

Year before: \$2,441

INTEREST INCOME

Year to date: \$6,944

Last Year:

Year before:

HUSBAND'S MOTHER'S CONTRIBUTION OF \$1,736 FOR 4 MONTHS

**3. Payments to creditors**

None Complete a. or b., as appropriate, and c.



a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None



c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**4. Suits and administrative proceedings, executions, garnishments and attachments**

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>WEBB V. HIGH MOUNTAIN HUNTING AND HILDERBRAND</b>	<b>DISCRIMINATION</b>	<b>USDC-EW</b>	<b>PENDING</b>

<b>HOPE V. HILDERBRAND</b>	<b>SMALL CLAIMS</b>	<b>CHELAN CO. DIST. SY14-0493</b>	<b>JUDGEMENT</b>
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None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
<b>Name: FOUNDATION BANK Address:</b>	<b>@6/14</b>	<b>Description: UTILITY TRAILER Value: @\$4,000</b>

### 6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 7. Gifts

None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF  
PROPERTYDESCRIPTION OF CIRCUMSTANCES AND, IF LOSS  
WAS COVERED IN WHOLE OR IN PART BY  
INSURANCE, GIVE PARTICULARSDATE  
OF LOSS

**Description:** *KIMBER  
PISTOL, BINOCULARS, DVD  
MACHINE*  
**Value:** *@3,000*

**Circumstances:** *THEFT FROM VEHICLE  
DURING 2014 SUPERBOWL*  
**Insurance:**

*1/14***9. Payments related to debt counseling or bankruptcy**

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<i>Payee: JOHN W. BEUHLER JR. Address: S. 23 WENATCHEE AVE., #124 POB 3880 WENATCHEE, WA 98801</i>	<i>Date of Payment: Payor: KELSEY R HILDERBRAND</i>	<i>\$765.00</i>

<i>Payee: SUMMITFE.ORG Address:</i>	<i>Date of Payment: Payor: DEBTORS</i>	<i>\$9.95</i>
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**10. Other transfers**

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None ☐ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
<b>Owner:</b> LARRY AND MARILYN ANDERSON (WIFE'S PARENTS) <b>Address:</b>	<b>Description:</b> 1979 VW BUB <b>Value:</b> UNKNOWN	DEBTOR'S RESIDENCE
<b>Owner:</b> VARIOUS <b>Address:</b>	<b>Description:</b> CONSIGNMENT FIREARMS <b>Value:</b> UNKNOWN	DEBTORS' RESIDENCE.  ** DEBTOR'S LLC, HIGH MOUNTAIN HUNTING HAD IN ITS POSSESSION A NUMBER OF FIREARMS BELONGING TO THIRD PARTIES WHO HAD THEM AT HIGH MOUNTAIN ON CONSIGNMENT FOR SALE. THOSE FIREARMS ARE AT DEBTORS' RESIDENCE FOR SAFEKEEPING.

**15. Prior address of debtor**

None ☒ If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**17. Environmental Information**

None ☒ For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or

similar term under an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

### 18. Nature, location and name of business

None ☐ a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
HIGH MOUNTAIN HUNTING SUPPLY LLC	TaxPayer ID: 26-0330504	223 NORTH MISSION Wenatchee WA, 98801	HUSNTING SUPPLIES	4/04 TO 4/14
HILDERCORP	ID: 7517	DEBTOR'S RESIDENCE	HOLDING COMPANY FOR HIGH MOUNTAIN HUNTING BUILDING	@2007 TO CURRENT

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



## NAME AND ADDRESS

## DATES SERVICES RENDERED

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

**19. Books, records and financial statements**

- None ☐ a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

## NAME AND ADDRESS

## DATES SERVICES RENDERED

**Name: ZACK KERSHNER****Dates: THROUGH 2014****Address: POB 788 CHELAN, WA 98816**

- None ☒ b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

- None ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

## NAME

## ADDRESS

**Name: DEBTORS AND ZACH****KERSHNER****Missing:**

- None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

## NAME

## ADDRESS

## DATES ISSUED

**FOUNDATION BANK  
(VARIOUS OTHER HIGH  
MOUNTAIN HUNTING  
VENDORS BUT DATES  
UNKNOWN)**

**Dates: 2013 TO  
FOUNDATION BANK**

**20. Inventories**

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE  
OF INVENTORY

## INVENTORY SUPERVISOR

DOLLAR AMOUNT  
OF INVENTORY  
(Specify cost, market or other basis)**Last: 2013**

**Supervisor: VARIOUS HIGH MOUNTAIN  
HUNTING EMPLOYEES. KEPT IN**

**Value:  
Basis:**

DATE  
OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT  
OF INVENTORY  
(Specify cost, market or other basis)**COUNTERPOINT POS SYSTEM**None ☐ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.DATE  
OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

**Last: 2013****Custodian: ZACH KERSHNER AND DEBTORS****Address:****21. Current Partners, Officers, Directors and Shareholders**None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
<b>Name: DEBTORS</b>	<b>MEMBERS</b>	<b>100% LLC OWNERS</b>
<b>Address:</b>		

**22. Former partners, officers, directors and shareholders**None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.None ☒ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.**23. Withdrawals from a partnership or distribution by a corporation**None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.**24. Tax Consolidation Group.**None ☒ If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

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**25. Pension Funds.**

None ☒ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

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*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 9/15/2014

Signature /s/ KELSEY R HILDERBRAND  
of Debtor

Date 9/15/2014

Signature /s/ JENNIFER B. HILDERBRAND  
of Joint Debtor  
(if any)

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 34(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

\_\_\_\_\_  
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social-Security No.(Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social-security number of the officer, principal,, responsible person, or partner who signs this document.*

\_\_\_\_\_

\_\_\_\_\_  
Address

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

***A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.***

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

In re *KELSEY R HILDERBRAND and JENNIFER B. HILDERBRAND*Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

## CHAPTER 7 STATEMENT OF INTENTION - JOINT DEBTS

**Part A -** Debts Secured by property of the estate. (Part A must be completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	<b>Creditor's Name :</b> <i>BANK OF AMERICA, NA</i>	<b>Describe Property Securing Debt :</b> <i>RESIDENCE</i>
Property will be (check one) : <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained  If retaining the property, I intend to (check at least one) : <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C § 522 (f)).  Property is (check one) : <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		

Property No. 2	<b>Creditor's Name :</b> <i>BANK OF AMERICA</i>	<b>Describe Property Securing Debt :</b> <i>2010 YUKON DENALI</i>
Property will be (check one) : <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained  If retaining the property, I intend to (check at least one) : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C § 522 (f)).  Property is (check one) : <input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt		

Property No. 3	<b>Creditor's Name :</b> <b>FOUNDATION BANK</b>	<b>Describe Property Securing Debt :</b> <b>BUILDING 223 N. MISSIION</b>
Property will be (check one) : <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained  If retaining the property, I intend to (check at least one) : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C § 522 (f)).  Property is (check one) : <input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt		

**Part B -** Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No.	<b>Lessor's Name:</b> <b>None</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
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### Signature of Debtor(s)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: 9/15/2014Debtor: /s/ KELSEY R HILDERBRANDDate: 9/15/2014Joint Debtor: /s/ JENNIFER B. HILDERBRAND

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF WASHINGTON**

In re **KELSEY R HILDERBRAND**  
**and**  
**JENNIFER B. HILDERBRAND**

Case No.  
Chapter 7

\_\_\_\_\_/ Debtor  
Attorney for Debtor: **JOHN W. BEUHLER JR.**

**STATEMENT PURSUANT TO RULE 2016(B)**

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
 

a) For legal services rendered or to be rendered in contemplation of and in connection with this case . . . . .	\$	<b>765.00</b>
b) Prior to the filing of this statement, debtor(s) have paid . . . . .	\$	<b>765.00</b>
c) The unpaid balance due and payable is . . . . .	\$	<b>0.00</b>
3. \$ 335.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
  - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
  - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
  - c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and  
**None other**
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and  
**None other**
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:  
**None**
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:  
**None**

Dated: **9/15/2014**

Respectfully submitted,

X /s/ **JOHN W. BEUHLER JR.**  
\_\_\_\_\_  
Attorney for Petitioner: **JOHN W. BEUHLER JR.**  
**JOHN BEUHLER LAW FIRM, PLLC**  
**S. 23 WENATCHEE AVE., #124**  
**POB 3880**  
**WENATCHEE WA 98801**  
**509 663-0531**  
**john@jblaw.us**